08-14-89 SHIPPR 15505
Form Approved 088 No. 2050-0039 (Expires 9-30-91)

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento: California

WASTE MANIFEST CADOOBE 5 2 9 8 8	2. Page 1 Information in the shaded areas of 1 is not required by Federal law.						
3. Generator's Name and Mailing Address PARA PLATE		A. State	Manifest Dogu Q	88614738			
15910 SHOEMAKER., CERRITOS, CA 90703		B. State Generator's ID					
4. Generator's Phone 213 404-3434	one 21 3 404-3434 Company Name 6. US EPA ID Number			C. State Transporter's ID 2/2 38 D. Transporter's Phone (213) 698-0991			
because of the second s							
OMEGA RECOVERY SERVICES CADO42245							
7. Transporter 2 Company Name 8. US EPA ID Number		Carlo Carlo	Transporter's	D			
		14-17-18-27	porter's Phone		100		
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD	•	G. State Facility's ID CIAIDIO 122450 01 VI. Facility's Phone					
WHITTIER, CA 90602 ICIAIDI0141212144	5101011	(21	3) 698-0	991			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Conta		13. Total Quantity	14. Unit	Waste N		
	No.	Тура		Wt/Vol	State		
WASTE ORM-A n.o.s NA 1693							
(FLEXOSOLVENT)	01010	Disc	3010161	G	EPA/Other		
b.		11111111	101601801		State		
					EPA/Other		
			1111				
c.					State		
		.			EPA/Other		
d.				+	Stato		
<u>"</u>					FDALON		
	111		1111		EPA/Other		
		C.		d.			
15. Special Handling Instructions and Additional Information			التحوالا والمحود التنافية	ALL INCOME			
					7.		
			9.44				
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